1976 Swine Flu

As chief of the NIAID's Clinical Physiology Section of the Laboratory of Clinical Investigation, Dr. Fauci was, in 1976, a frontline spectator during the NIH's bogus swine flu pandemic. That year, a soldier at Fort Dix died of a lung ailment following a forced march. Army physicians sent some samples to CDC, which identified the malady as a swine flu. Dr. Fauci's NIAID boss, Richard Krause (who Dr. Fauci would shortly replace), labored with his CDC counterpart, David Sencer, to spread terror of a catastrophic pandemic and initiate public demand for a vaccine. The NIAID chief convened in-house strategy sessions with Merck's iconic vaccine developer Maurice Hilleman and other immunization industry nabobs. Congressional investigators subsequently landed the notes from those consultations, in which Dr. Hilleman candidly confesses that the resulting vaccine "had nothing to do with science and everything to do with politics." In the August 2020 Rolling Stone, Gerald Posner, author of Pharma: Greed, Lies, and the Poisoning of America, recounted how Merck and other manufacturers utilized their secret meeting with the regulators to hatch a scheme that would guarantee industry profits while shielding Pharma from liability. This innovation—now a persistent feature of Big Pharma's business model—turned out to be carte blanche for negligent and even criminal behavior. Pharma and NIAID told Congress, the White House, and the public that the Fort Dix swine flu was the same strain responsible for the 1918 Spanish flu

pandemic, which, they warned, had killed 50 million people worldwide. They were lying; scientists at Fort Dix, the CDC, and HHS knew that H1N1 was an ordinary pig virus posing no risk for humans. Nevertheless, NIAID conducted a hard-sell campaign warning of one million deaths in the United States. Working with the pharmaceutical companies, NIAID, CDC, and Merck persuaded incoming president Gerald Ford to sign a bill appropriating $135 million for vaccine manufacturers to inoculate 140 million Americans against the pestilence. At the behest of federal regulators, Ford appeared on TV urging all Americans to get vaccinated. Ford’s obligatory references to the 1918 Spanish flu mass fatalities inspired some 50 million US citizens to hotfoot it to their local health center for injections of hastily concocted, shoddily tested, zero-liability vaccines that HHS and Merck conspired to rush to market. CDC director David Sencer set up a swine flu “war room” to bolster public fear amongst an enthused media.

The government launched a fullscale promotional campaign, including terrifying TV commercials depicting remorseful patients who dodged their vaccination and suffered serious illness. A CDC press release claimed that popular TV star Mary Tyler Moore had taken the jab. Moore told 60 Minutes she had avoided the shot due to her concerns about side effects. She said that she and her doctor were very happy she didn’t get it. In the end, the actual number of pandemic swine flu casualties in 1976 was not 1 million, but one. Dr. Harvey Fineberg,

who authored the government’s 1978 comprehensive postmortem of NIAID’s response to that fake pandemic, told the WHO Bulletin: “In ’76, the virus was detected in a single military installation, at Fort Dix, New Jersey. In the ensuing weeks and months, not one related swine flu case was reported elsewhere in New Jersey, the USA or anywhere else in the world. . . . At the same time, political decision-makers consistently thought that the scientists were giving them no choice but to go ahead with a mass immunization programme.” NIH’s influenza and flu vaccine expert senior bacteriologist and virologist Dr. John Anthony Morris informed his HHS bosses that the flu scare was a farce and that NIAID’s campaign was a boondoggle to promote a dangerous and ineffective flu vaccine for a greedy industry. Dr. Morris had worked for thirty-six years at federal public health agencies beginning in 1940. His office, at the time of the 1976 “outbreak,” was a few doors down the hall from Tony Fauci’s. Morris served as the government’s chief vaccine officer and led research on the flu and flu vaccines for the Bureau of Biologics Standards (BBS) at NIH and later at FDA. Morris enjoyed a distinguished career researching viral respiratory diseases. When Dr. Morris protested the fraud, his direct superior ordered him to stand down, advising Morris “not to talk about this.” His NIH bosses threatened Dr. Morris with loss of employment and professional ruin if he failed to keep his mouth shut. When vaccine recipients began reporting adverse reactions, including Guillain-Barré Syndrome (GBS), Dr. Morris disobeyed orders. Publicly declaring that there was

zero evidence that the Fort Dix swine flu was contagious to humans, he reiterated, the vaccine could induce neurological side effects. In response, HHS officials confiscated Dr. Morris's research materials, changed the laboratory locks, moved him to a small room with no telephone, reassigned his laboratory staff, forbade him to see visitors except with permission, and blocked his efforts to publish his findings. Finally, after months of threats and petty harassment, HHS fired Morris for insubordination, citing a long list of drummed-up charges, including failure to return library books on time. Over at CDC, scientist Dr. Michael Hatwick was also warning HHS bigwigs that the flu vaccine could cause widespread brain injuries. The 1976 swine flu vaccine was so fraught with problems that HHS discontinued the jab after vaccinating 49 million Americans. According to news accounts, the incidence of flu was seven times greater among the vaccinated than the unvaccinated. Furthermore, the vaccine caused some 500 cases of the degenerative nerve disease Guillain-Barré Syndrome, 32 deaths, more than 400 paralyzations, and as many as 4,000 other injuries. Public health officials pulled the vaccine. President Ford fired David Sencer. American taxpayers ended up paying for the swine flu vaccine coming and going, through guaranteed profits for Merck at the front end and outlays for piles of lawsuits from vaccine injury victims on the other side. The government paid $134 million for the swine flu vaccine program. Injured plaintiffs filed 1,604 lawsuits. By April 1985, the government had paid out $83,233,714 and spent tens of

millions of dollars adjudicating and processing those claims.

The 1976 swine flu event was the first time that the federal government agreed to serve as pharma’s insurer. The episode taught the public an important lesson: tort immunity incentivizes dangerous and ineffective vaccines. Industry and the magisterial class learned an entirely different morale from the tragic episode. In 1986 they made swine flu vaccine template the model for the National Childhood Vaccine Injury Act, which shielded all mandated vaccines from liability.